

Federal Communications Commission	
Docket No. <u>97-43</u>	Exhibit No. <u>288</u>
Presented by <u>WYB</u>	<u>DEC 03 1993</u>
Disposition	Received <u>DEC 03 1993</u>
	Rejection
Reporter <u>A. Luchner</u>	
Date <u>DEC 03 1993</u>	

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NATIONAL MINORITY TELEVISION INC.
P.O. BOX C-11951
SANTA ANA, CA 92711
714/731-7571

June 23, 1988

Mr. Mark Jividan
1458 Double N Road
Columbus, OH 43215

Dear Mr. Jividan;

Thank you for your permission to use your tower for presentation of an application for Channel 20 to serve Columbus, Ohio.

We look forward to a long and mutually beneficial relationship upon the grant of this application by the Federal Communications Commission and I will keep you informed as to the progress of this application through the approval process. We hope that it will come thorough very quickly and that we can be on within six to nine months from now.

Again, thank you for your cooperation. You may feel free to contact me at any time at my number in California of 714-665-2128.

Sincerely yours,



George D. Sebastian
Director, Low Power Television
Development

GDS/clm

Federal Communications Commission

Docket No. 93-75 Exhibit No. 269

Presented by MMB

DEC 03 1993

DEC 03 1993

Diagnosis

Received

Accepted

Reporter

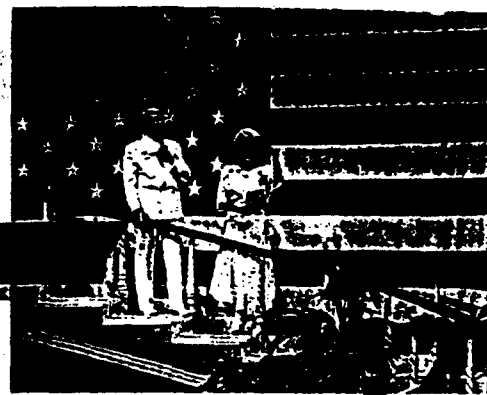
A. Wehman

Date Dec 03 1993

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Praise The Lord



TRINITY BROADCASTING NETWORK VOL. XVI, NO. VII JULY 1989

“LET THE HEATHEN RAGE...!”

1989, the year that *ALL HELL BROKE LOOSE!* For starters, vicious lying rumors about TBN, Paul and Jan began circulating. Sectors of the secular press picked up the cry. My “business ethics” were challenged. Certain religious bodies *bought the lie* and launched a “non-investigation.” The media launched an attack on our charitable and Christian television outreaches in South Africa.

Days were consumed as I *answered every charge* with stacks of documentation proving that every charge was absolutely *FALSE!*

“LORD, HOW ARE THEY INCREASED THAT TROUBLE ME! MANY ARE THEY THAT RISE UP AGAINST ME.” Psalm 3:1

I guess what hurt the most was the fact that much of the attack came from my *so called brothers!* Things have not changed much since Joseph’s day, *have they?* Naturally, most of this broke just before Praise-A-Thon in March and early April. Satan always *times his attacks* to try and hurt our twice-a-year fund raising drives. It seemed like we got a nasty news item every day for several days leading up to Praise-A-Thon. Jan and I were accused of everything from being cruel on the one hand, to being excessively *generous* to third world nations in our efforts to expand Christian television worldwide – on the other.

“WHY DO THE HEATHEN RAGE, AND THE PEOPLE IMAGINE A VAIN THING?” Psalm 2:1

I’ll tell you why... This recent Praise-A-Thon, in spite of “*ALL HELL,*” was the *GREATEST IN THE 16 YEAR HISTORY OF TBN!* April was UP 44% over last April. In fact, certain stations logged *over 100% increases!* PRAISE THE LORD!

“HEAR ME WHEN I CALL, O GOD...: THOU HAST ENLARGED ME WHEN I WAS IN DISTRESS...” Psalm 4:1

In spite of *all* satan hurled at us, 20 new stations signed on the air the first half of 1989; *Brazil* was GRANTED a full power station; construction started in *Costa Rica*; *Milan, Italy* signed ON THE AIR; our first two radio stations were GRANTED and a *WHOLE NETWORK* was GRANTED in *South Africa!* *How’s that for trouble, satan?*

Next was a most *unusual* problem. A large well established company, which has supplied many of our TV transmitters went bankrupt. Five large full power transmitters were under construction when the bad news hit. We will salvage most of our equipment and investment from the wreckage, but *El Salvador, Portland, Oregon* and other affiliated projects *will be delayed* by several weeks – possibly *three to four months* for some. Please pray that God will guide us and protect us through these uncharted and troubled waters.

Next, while trying to take a few days rest after Praise-A-Thon, I made the mistake of trying to ride a spirited Arabian horse near Dallas, Texas! Mark, the trainer, rode him, Matt, my son rode him, but when I saddled up – *ALL HELL, AGAIN!* Matt said, “All four hooves came off the ground at once!” and I joined the ranks of the *Wild West*

Federal Communications Commission

Docket No. 93-75 Exhibit No. 270

Presented by MMD

DEC 03 1993

Disposition

DEC 03 1993

Reporter

Adrian

Date

DEC 03 1993

CONTINUED FROM PAGE 1

Rodeo! By faith I have not missed *one* PRAISE program or slackened my schedule, but I have been in severe pain in my right side and arm where I landed! *Pray* that an important schedule in *So. Africa* will *not* be affected. And, Yes, dear partners, my horse riding days are *over*!

Beloved partners, we used to sing a grand old song – "THE FIGHT IS ON, O CHRISTIAN SOLD" Well, we need to revive that song! In addition to all I have just mentioned, I am still troubled that *much* of the ecclesiastical world still *refuses* to *forgive* and *restore* our fallen Christian brothers. Perhaps this is as it must be. The religious leaders of Jesus' day wouldn't even accept *HIM* – *the perfect Son of God*! I don't care what Jimmy Swaggart did or didn't do. He *ASKED* FOR MY FORGIVENESS, so I have *NO CHOICE* but to *FORGIVE* – that is *IF* I want *my* sins forgiven!

"BUT IF YE DO NOT FORGIVE, NEITHER WILL YOUR FATHER WHICH IS IN HEAVEN FORGIVE YOUR TRESPASSES." Mark 11:26

I refuse to engage in any arguments or debates on *man-made* programs of restoration. I can't find any formula in scripture for man-made restoration except *ONE* – *FORGIVE*! It is God who judges and *HIS* gifts and callings are *"WITHOUT REPENTANCE."* Romans 11:29 Jesus had *much* to say about the traditions of the religious leaders of his day...

"WOE TO YOU SCRIBES, AND PHARISEES, HYPOCRITES! FOR YE PAY TITHE...AND HAVE OMITTED THE WEIGHTIER MATTERS OF THE LAW, JUSTICE, MERCY AND FAITH... YE BLIND GUIDES, WHICH STRAIN AT A GNAT AND SWALLOW A CAMEL."
Matthew 23:23, 24

I grieve most of all for the lost sinner looking in on all of the infighting and *lack of forgiveness*. I can imagine what most of them must be thinking – "WHO NEEDS THIS KIND OF TROUBLE? THERE IS MORE FORGIVENESS DOWN AT JOE'S BAR THAN I READ IN THE PAPERS ABOUT YOU CHRISTIANS!"

I want to cry out – *DEAR SINNER FRIEND* – *DON'T JUDGE JESUS BY THE LIVES OF SOME CHRISTIANS!* We are *ALL* sinners; we all need to be forgiven.

Yes, partners, this all had to come to bring about *the final separation*. Jesus said, let the wheat and the tares *grow together* until the harvest. *Then* will he separate the sheep from the goats and the wheat from the tares. *Glory* to God, *in spite of* demons and devils, trials and tribulations, even *all Hell* breaking loose, *THE GREAT HARVEST CONTINUES!* God showed me in a vivid dream back in 1987 that a *STORM* was coming against TBN. That dream a violent storm from the *EAST* crashed against TBN. I saw the face of a man materialize from the dark billowing cloud as the full fury of the storm hit. But as *that face* tried to break the wall of TBN, *MANY OF US RUSHED TO THE BROKEN WINDOW* and with our very bodies *BLOCKED* that face and the entrance of the storm.

Praise the Lord! In spite of all that *HELL* has hurled against us the old Ship of TBN rides *HIGH* on the waves of adversity. Partners, *how many times* do we have to remind ourselves – *WE WIN!*

Jan and I know that you, too, are going through your fiery trials. Satan is out to kill, steal and destroy *all that you hold dear*. But partners, we will stand *with you* just as *you* have stood with us. Together, we *HAVE* put the devil to flight and will continue to *PULL DOWN* his strongholds through the power of Jesus Christ!

Yes, *ALL HELL* has broken loose – so what? *ALL HEAVEN* is on the way and *together* we are hastening the *DAY!* We love you and are your prayer partners. Just write to Jan and me and let us know your needs. Thank you, too, for your faithful love gifts that keep this great Network *ON THE AIR!*

Paul

"WELL DONE, THOU GOOD AND FAITHFUL SERVANT..." Matt. 25:21

This is the *BEAUTIFUL* award that we received on behalf of YOU TBN Partners who have made Trinity Broadcasting Network possible (Now over 162 Stations!). What a tremendous honor to receive this commendation from the Los Angeles County Board of Supervisors presented by the Honorable KENNETH HAHN, Supervisor of the Second District of the County of Los Angeles, for the "Outstanding Growth of Trinity Broadcasting Network throughout America and around the world." Supervisor Hahn holds the distinct honor in the state of California of an unsurpassed record of being elected to office for *TEN* consecutive four-year terms! He is a beloved Christian brother, esteemed statesman and a TBN partner! Standing behind Supervisor Hahn are Supervisor PETE SCHABARUM of the First District and Supervisor ED EDELMAN of the Third District of the County of Los Angeles. When righteous men hold office, the people rejoice. (Prov. 29:2)



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Form

990**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

1988Department of the Treasury
Internal Revenue ServiceUnder section 501(c) (except black lung benefit trust or private foundation)
of the Internal Revenue Code or section 4947(a)(1) trust

Note: You may be required to use a copy of this return to satisfy state reporting requirements. See instruction D.

For the calendar year 1988, or fiscal year beginning

, 1988, and ending

, 19

Use IRS label. Otherwise, please print or type.	X5 59-1991004 8812 89 03 15 3 IB		A Employer identification number (see instruction L)
	TRINITY BROADCASTING OF FLORIDA INC		59-1991004
	2442 MICHELLE DR		B State registration number (see instruction D)
	TUSTIN CA 92680		C Section 4947(a)(1) trusts filing this form in lieu of Form 1041, check here <input type="checkbox"/> (see instruction C10)

D Check type of organization—Exempt under section ☒ 501(c)(3) (insert number), OR ☐ section 4947(a)(1) trust

E Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ☐

Check here if application for exemption is pending ☐

F Is this a group return (see instruction J) filed for affiliates? ☐ Yes ☒ No

If "Yes," enter the number of affiliates for which this return is filed _____

G If "Yes" to either, give four-digit group exemption number (GEN) ☐

Is this a separate return filed by a group affiliate? ☐ Yes ☐ No

H ☐ Check here if your gross receipts are normally not more than \$25,000 (see instruction B11). You do not have to file a completed return with IRS but should file a return without financial data if you were mailed a Form 990 Package (see instruction A). Some states may require a completed return.

I ☐ Check here if gross receipts are normally more than \$25,000 and line 12 is \$25,000 or less. Complete Parts I (except lines 13-15), III, IV, VI, and VII and only the indicated items in Parts II and V (see instruction I). If line 12 is more than \$25,000, complete the entire return.

501(c)(3) organizations and 4947(a)(1) trusts must also complete and attach Schedule A (Form 990). (See instructions.)

These columns are optional—
see instructions

Part I Statement of Support, Revenue, and Expenses and Changes in Fund Balances		(A) Total	(B) Unrestricted/Expendable	(C) Restricted/Nonexpendable
Support and Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Direct public support	1,657,551		
	b Indirect public support			
	c Government grants			
	d Total (add lines 1a through 1c) (attach schedule—see instructions).	1,657,551		
	2 Program service revenue (from Part IV, line f)	829,730		
	3 Membership dues and assessments			
	4 Interest on savings and temporary cash investments	61,398		
	5 Dividends and interest from securities			
	6a Gross rents			
	b Minus: rental expenses			
	c Net rental income (loss)			
7 Other investment income (Describe <input type="checkbox"/> Securities <input type="checkbox"/> Other)				
8a Gross amount from sale of assets other than inventory				
b Minus: cost or other basis and sales expenses				
c Gain (loss) (attach schedule)				
9 Special fundraising events and activities (attach schedule—see instructions):				
a Gross revenue (not including \$ of contributions reported on line 1a)				
b Minus: direct expenses				
c Net income (line 9a minus line 9b)				
10a Gross sales minus returns and allowances				
b Minus: cost of goods sold (attach schedule)				
c Gross profit (loss)				
11 Other revenue (from Part IV, line g)	1,911			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8c, 9c, 10c, and 11)	2,550,590			
Expenses	13 Program services (from line 44, column (B)) (see instructions)	1,193,081		
	14 Management and general (from line 44, column (C)) (see instructions)	748,415		
	15 Fundraising (from line 44, column (D)) (see instructions)	108,001		
	16 Payments to affiliates (attach schedule—see instructions)			
17 Total expenses (add lines 16 and 44, column (A))	2,049,497			
Fund Balances	18 Excess (deficit) for the year (subtract line 17 from line 12)	501,093		
	19 Fund balances or net worth at beginning of year (from line 74, column (A))	1,796,465		
	20 Other changes in fund balances or net worth (attach explanation)			
	21 Fund balances or net worth at end of year (add lines 18, 19, and 20)	2,297,558		

Federal Communications Commission

Docket No. 93-75 Exhibit No. 271

Presented by MM

DEC 03 1993

Disposition

Received

DEC 03 1993

Rejected

Reporter

DEC 03 1993

Date

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for most sections 501(c)(3) and (c)(4) organizations and 4947(a)(1) trusts but optional for others. (See instructions.)

Do not include amounts reported on lines 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
23	Specific assistance to individuals				
24	Benefits paid to or for members				
25	Compensation of officers, directors, etc.				
26	Other salaries and wages	248,771	147,259	106,512	
27	Pension plan contributions				
28	Other employee benefits	1,069		1,069	
29	Payroll taxes	21,086		21,086	
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees + PROFESSIONAL FEES	28,929	3,980	24,949	
33	Supplies	56,740	12,998	26,749	16,993
34	Telephone	20,903		20,903	
35	Postage and shipping	46,693	2,858	6,936	36,899
36	Occupancy, RENT, UTILITIES	161,267		161,267	
37	Equipment rental and maintenance	157,574	59,137	98,437	
38	Printing and publications	20,056			20,056
39	Travel	40,404	18,997	21,407	
40	Conferences, conventions, and meetings				
41	Interest	406		406	
42	Depreciation, depletion, etc. (attach schedule)	558,834	302,503	256,331	
43	Other expenses (itemize): a	20.1		20.1	
b	AMORTIZATION- LICENSE	165,444	165,444		
c	SATELLITE RENTAL	289,000	289,000		
d	AIRTIME RENTAL	182,525	182,525		
e	TAX, FEE, LICENSES	7,162		7,162	
f	TELEPHONE EXPENSES	37,383	3,330		34,053
44	Total functional expenses (add lines 22 through 43) Organizations completing columns B-D, carry these totals to lines 13-15.	2,049,497	1,193,081	748,415	108,001

Part III Statement of Program Services Rendered

List each program service title on lines a through d; for each, identify the service output(s) or product(s), and report the quantity provided. Enter the total expenses attributable to each program service and the amount of grants and allocations included in that total. (See instructions for Part III.)

Expenses
(Optional for some organizations—see instructions)

a	PRODUCTION AND BROADCASTING OF RELIGIOUS TELEVISION PROGRAMS, REVENUES REPRESENT CHARGES TO NON-AFFILIATES FOR BROADCASTING THEIR RELIGIOUS PROGRAMS.	(Grants and allocations \$)	1,193,081
b		(Grants and allocations \$)	
c		(Grants and allocations \$)	
d		(Grants and allocations \$)	
e	Other program service activities (attach schedule)	(Grants and allocations \$)	
f	Total (add lines a through e) (should equal line 44, column (B))		1,193,081

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Part IV Program Service Revenue and Other Revenue (State nature.)		Program service revenue	Other revenue
a	Fees from government agencies		
b	BROADCASTING + PRODUCTION COST SHARING	829,730	
c	MISCELLANEOUS		1,911
d			
e			
f	Total program service revenue (enter here and on line 2)	829,730	
g	Total other revenue (enter here and on line 11)		1,911

Part V Balance Sheets If line 12 or Column (B) of line 59 is more than \$25,000, complete the entire balance sheet. If line 12, Part I, and Column (B) of line 59 are \$25,000 or less, you may complete only lines 59, 66, 74, and 75. See instructions.

Note: Columns (C) and (D) are optional. Columns (A) and (B) must be completed to the extent applicable. Where required, attached schedules should be for end-of-year amounts only.		(A) Beginning of year	End of year		
			(B) Total	(C) Unrestricted/Expendable	(D) Restricted/Nonexpendable
Assets					
45	Cash—noninterest-bearing	1,830			
46	Savings and temporary cash investments	300,000	1,072,639		
47	Accounts receivable ▶ minus allowance for doubtful accounts ▶	205,231	186,851		
48	Pledges receivable ▶ minus allowance for doubtful accounts ▶				
49	Grants receivable				
50	Receivables due from officers, directors, trustees, and key employees (attach schedule)				
51	Other notes and loans receivable ▶ minus allowance for doubtful accounts ▶				
52	Inventories for sale or use				
53	Prepaid expenses and deferred charges				
54	Investments—securities (attach schedule)				
55	Investments—land, buildings, and equipment: basis ▶ minus accumulated depreciation ▶ (attach schedule)				
56	Investments—other (attach schedule)				
57	Land, buildings, and equipment: basis ▶ minus accumulated depreciation ▶ (attach schedule)	8,878,446	8,651,180		
58	Other assets ▶ DUE FROM AFFILIATES	10,692	20,398		
59	Total assets (add lines 45 through 58)	9,396,199	9,931,068		
Liabilities					
60	Accounts payable and accrued expenses	52,635	23,589		
61	Grants payable				
62	Support and revenue designated for future periods (attach schedule)				
63	Loans from officers, directors, trustees, and key employees (attach schedule)				
64	Mortgages and other notes payable (attach schedule)				
65	Other liabilities ▶ DUE TO AFFILIATES	7,542,099	7,609,921		
66	Total liabilities (add lines 60 through 65)	7,599,734	7,633,510		
Fund Balances or Net Worth					
Organizations that use fund accounting, check here <input checked="" type="checkbox"/> and complete lines 67 through 70 and lines 74 and 75.					
67a	Current unrestricted fund	1,584,759	2,039,105		
b	Current restricted fund	214,706	258,453		
68	Land, buildings, and equipment fund				
69	Endowment fund				
70	Other funds (Describe ▶)				
Organizations that do not use fund accounting, check here <input type="checkbox"/> and complete lines 71 through 75.					
71	Capital stock or trust principal				
72	Paid-in or capital surplus				
73	Retained earnings or accumulated income				
74	Total fund balances or net worth (see instructions)	1,796,465	2,297,558		
75	Total liabilities and fund balances/net worth (see instructions)	9,396,199	9,931,068		

Part VI List of Officers, Directors, and Trustees (List each one whether compensated or not. See instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter zero)	(D) Contributions to employee benefit plans	(E) Expense account and other allowances
SEE STATEMENT #2				

Part VII Other Information

	Yes	No
76 Has the organization engaged in any activities not previously reported to the Internal Revenue Service? If "Yes," attach a detailed description of the activities.		X
77 Have any changes been made in the organizing or governing documents, but not reported to IRS? If "Yes," attach a conformed copy of the changes.		X
78 If the organization had income from business activities, such as those reported on lines 2, 9, and 10 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b If "Yes," have you filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?		N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (See instructions.) If "Yes," attach a statement as described in the instructions.		X
80 Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? (See instructions.) If "Yes," enter the name of the organization		
SEE STATEMENT #1		
and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81 a Enter amount of political expenditures, direct or indirect, as described in the instructions		NONE
b Did you file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year?		X
82 Did your organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? If "Yes," you may indicate the value of these items here. Do not include this amount as support in Part I or as an expense in Part II. See instructions for reporting in Part III		X
83 Section 501(c)(5) or (6) organizations.—Did the organization spend any amounts in attempts to influence public opinion about legislative matters or referendums? (See instructions and Regulations section 1.162-20(c).) If "Yes," enter the total amount spent for this purpose		N/A
84 Section 501(c)(7) organizations.—Enter: a Initiation fees and capital contributions included on line 12.		
b Gross receipts, included in line 12, for public use of club facilities (See instructions.)		
c Does the club's governing instrument or any written policy statement provide for discrimination against any person because of race, color, or religion? (See instructions.)		N/A
85 Section 501(c)(12) organizations.—Enter amount of:		
a Gross income received from members or shareholders		
b Gross income received from other sources (do not net amounts due or paid to other sources against amounts due or received from them)		
86 Public interest law firms.—Attach information described in the instructions.		
87 List the states with which a copy of this return is filed		
88 During this tax year did you maintain any part of your accounting/tax records on a computerized system?	X	
89 The books are in care of		
Trinity Broadcasting Network Telephone no. (714) 832-2950		
Located at 2442 Michelle Drive, Tustin, California 92680		
90 Section 4947(a)(1) trusts filing Form 990 in lieu of Form 1041.—Enter the amount of tax-exempt interest received or accrued during the tax year.		

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: Stephen P. Williams Date: 7/13/89 Title: DIRECTOR OF FINANCE

Paid Preparer's Use Only

Preparer's signature: Richard E. Hoffman Date: 7/10/89 Check if self-employed ☐

Firm's name (or yours, if self-employed) and address: Huffman & Co., CPAs - 945 W 6th St. ZIP code: 91720
Corona, California 91720

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Organization Exempt Under 501(c)(3)
(Except Private Foundation), 501(e), 501(f), 501(k), or Section 4947(a)(1) Trust
Supplementary Information
▶ Attach to Form 990.

OMB No. 1545-0047

1988

Name

TRINITY BROADCASTING OF FLORIDA, INC.

Employer Identification number

59-1991004

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See specific instructions.) (List each one. If there are none, enter "None.")

Name and address of employees paid more than \$30,000	Title and average hours per week devoted to position	Compensation	Contributions to employee benefit plans	Expense account and other allowances
.....				
.....				
.....				
.....				
.....				
.....				
.....				
Total number of other employees paid over \$30,000. ▶	NONE			

Part II Compensation of the Five Highest Paid Persons for Professional Services
(See specific instructions.) (List each one. If there are none, enter "None.")

Name and address of persons paid more than \$30,000	Type of service	Compensation
.....		
.....		
.....		
.....		
.....		
.....		
.....		
Total number of others receiving over \$30,000 for professional services. ▶	NONE	

Part III Statements About Activities

Yes (1) No (2)

- During the year, have you attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?
If "Yes," enter the total expenses paid or incurred in connection with the legislative activities \$ _____
Complete Part VI of this form for organizations that made an election under section 501(h) on Form 5768 or other statement. For other organizations checking "Yes," attach a statement giving a detailed description of the legislative activities and a classified schedule of the expenses paid or incurred.
- During the year, have you, either directly or indirectly, engaged in any of the following acts with a trustee, director, principal officer, or creator of your organization, or any taxable organization or corporation with which such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:
 - Sale, exchange, or leasing of property?
 - Lending of money or other extension of credit?
 - Furnishing of goods, services, or facilities?
 - Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
 - Transfer of any part of your income or assets?
If the answer to any question is "Yes," attach a detailed statement explaining the transactions.
- Do you make grants for scholarships, fellowships, student loans, etc.?
- Attach a statement explaining how you determine that individuals or organizations receiving disbursements from you in furtherance of your charitable programs qualify to receive payments. (See specific instructions.)

1		X
2a		X
2b		X
2c		X
2d		X
2e		X
3		X

(5)

25741

Part IV Reason for Non-Private Foundation Status (See instructions for definitions.)

The organization is not a private foundation because it is (check applicable box; please check only ONE box):

- 5 ☐ 1 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ 2 A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)
- 7 ☐ 3 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ 4 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ 5 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter name, city, and state of hospital ▶
- 10 ☐ 6 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete Support Schedule.)
- 11 ☒ 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete Support Schedule.)
- 12 ☐ 8 An organization that normally receives: (a) no more than 1/3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete Support Schedule.)
- 13 ☐ 9 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) boxes 5 through 12 above or (2) section 501(c)(4), (5), or (6) if they meet the test of section 509(a)(2). See section 509(a)(3).

Provide the following information about the supported organizations. (See instructions for Part IV, box 13.)

(a) Name of supported organizations	(b) Box number from above
N/A	

- 14 ☐ 0 An organization organized and operated to test for public safety. Section 509(a)(4). (See specific instructions.)

Support Schedule (Complete only if you checked box 10, 11, or 12 above.) Use cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 1987	(b) 1986	(c) 1985	(d) 1984	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,772,004	2,289,854	1,907,734	1,675,453	7,645,045
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	745,676	571,877	598,763	475,730	2,392,046
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	6,300	8,839	50,328	35,363	100,830
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for your benefit and either paid to you or expended on your behalf					
21 The value of services or facilities furnished to you by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach schedule. Do not include gain (or loss) from sale of capital assets	6,496	8,521	453,284	14,425	482,726
23 Total of lines 15 through 22	2,530,476	2,879,091	3,010,109	2,200,971	10,620,647
24 Line 23 minus line 17	1,784,900	2,307,214	2,411,346	1,725,241	8,228,701
25 Enter 1% of line 23	25,305	23,072	3,010	22,010	
26 Organizations described in box 10 or 11:					
a Enter 2% of amount in column (e), line 24					164,574
b Attach a list (not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1984 through 1987 exceeded the amount shown in 25a. Enter the sum of all excess amounts here					AVAILABLE ON REQUEST

(Continued on page 3)

6

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Part IV Support Schedule (continued) (Complete only if you checked box 10, 11, or 12 on page 2.)**27** Organizations described in box 12, page 2:

- a Attach a list for amounts shown on lines 15, 16, and 17, showing the name of, and total amounts received in each year from, each "disqualified person," and enter the sum of such amounts for each year:

(1987) (1986) (1985) (1984)

- b Attach a list showing, for 1984 through 1987, the name and amount included in line 17 for each person (other than "disqualified persons") from whom the organization received more, during that year, than the larger of: the amount on line 25 for the year or \$5,000. Include organizations described in boxes 5 through 11 as well as individuals. Enter the sum of these excess amounts for each year:

(1987) (1986) (1985) (1984)

- 28** For an organization described in box 10, 11, or 12, page 2, that received any unusual grants during 1984 through 1987, attach a list (not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15 above. (See specific instructions.)

Part V Private School Questionnaire

(To be completed ONLY by schools that checked box 6 in Part IV)

N/A

	Yes (1)	No (2)
29 Do you have a racially nondiscriminatory policy toward students by statement in your charter, bylaws, other governing instrument, or in a resolution of your governing body?		
30 Do you include a statement of your racially nondiscriminatory policy toward students in all your brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Have you publicized your racially nondiscriminatory policy by newspaper or broadcast media during the period of solicitation for students, or during the registration period if you have no solicitation program, in a way that makes the policy known to all parts of the general community you serve?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
.....		
.....		
.....		
32 Do you maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by you or on your behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
.....		
.....		
33 Do you discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance? (See instructions.)		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
.....		
.....		
34a Do you receive any financial aid or assistance from a governmental agency?		
34b Has your right to such aid ever been revoked or suspended?		
If you answered "Yes" to either 34a or b, please explain using an attached separate statement.		
35 Do you certify that you have complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation. (See instructions for Part V.)		

Part VI Lobbying Expenditures by Public Charities (see instructions)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check here ☐ a ☐ If the organization belongs to an affiliated group (see instructions).
 Check here ☐ b ☐ If you checked a and "limited control" provisions apply (see instructions).

Limits on Lobbying Expenses	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total (grassroots) lobbying expenses to influence public opinion		
37 Total lobbying expenses to influence a legislative body		
38 Total lobbying expenses (add lines 36 and 37)		
39 Other exempt purpose expenses (see Part VI instructions)		
40 Total exempt purpose expenses (add lines 38 and 39) (see instructions).		
41 Lobbying nontaxable amount. Enter the smaller of \$1,000,000 or the amount determined under the following table—		
If the amount on line 40 is—		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000		
The lobbying nontaxable amount is—		
20% of the amount on line 40.		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
42 Grassroots nontaxable amount (enter 25% of line 41)		
(Complete lines 43 and 44. File Form 4720 if either line 36 exceeds line 42 or line 38 exceeds line 41.)		
43 Excess of line 36 over line 42		
44 Excess of line 38 over line 41		

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45–50 for details.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenses During 4-Year Averaging Period				
	(a) 1988	(b) 1987	(c) 1986	(d) 1985	(e) Total
45 Lobbying nontaxable amount (see instructions)					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenses (see instructions)					
48 Grassroots nontaxable amount (see instructions)					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenses (see instructions)					

Part VII Information Regarding Transfers, Transactions, and Relationships With Other Organizations
See instructions on reverse side.

- 51** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers of:		
(i) Cash		X
(ii) Other assets		X
b Transactions:		
(i) Sales of assets		X
(ii) Purchases of assets		X
(iii) Rental of facilities or equipment		X
(iv) Reimbursement arrangements		X
(v) Loans or loan guarantees		X
(vi) Performance of services or membership or fundraising solicitations		X
c Sharing of facilities, equipment, mailing lists or other assets, or paid employees		X

d If "Yes" to any of the above, complete the following schedule. The "Amount involved" column below should always indicate the value of the goods, other assets, or services given. In addition, if the organization received less than fair market value in any transaction or sharing arrangement, the column should include the value of the goods, other assets, or services received.

[illegible]

- 52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527? ☐ Yes ☐ No
- b** If "Yes," complete the following schedule.

[illegible]

Form 4562

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization

▶ See separate instructions.

▶ Attach this form to your return. Mult. # 1

OMB No. 1545-0172

1988

67

Name(s) as shown on return

TRINITY BROADCASTING OF FLORIDA

Identifying number

591-99-1004

Business or activity in which this form relates

SCHEDULE

990

Part III Depreciation (Use Part III for automobiles, certain other vehicles, computers, and property used for entertainment, recreation, or amusement.)**Section A - Election to Expense Depreciable Assets Placed in Service During This Tax Year (Section 179)**

(a) Description of Property	(b) Date placed in service	(c) Cost	(d) Expense deduction
1			
2 Listed Property - Enter total from Part III, Section A, column (h).			
3 Total (add lines 1 and 2, but do not enter more than \$10,000).			
4 Enter the amount, if any, by which the cost of all section 179 property placed in service during this tax year is more than \$200,000.			
5 Subtract line 4 from line 3. If result is less than zero, enter zero. (See instructions for other limitations).			

Section B - Depreciation

(a) Class of Property	(b) Date placed in service	(c) Basis for depreciation (Business use only - see instructions)	(d) Recovery period	(e) Method of figuring depreciation	(f) Deduction
6 Modified Accelerated Cost Recovery System (MACRS) (see instructions): For assets placed in service ONLY during tax year beginning in 1988					
a 3 - year property					
b 5 - year property					
c 7 - year property					
d 10 - year property					
e 15 - year property					
f 20 - year property					
g Residential rental property					
h Nonresidential real property					
7 Alternative Depreciation System (ADS)					
8 Listed property - Enter total from Part III, Section A, column (g).					
9 MACRS deduction for assets placed in service prior to 1988 (see instructions)					

Section C - ACRS and/or Other Depreciation

10 Property subject to section 168(f)(1) election (see instructions)	
11 ACRS and/or other depreciation (see instructions)	558834

Section D - Summary

12 Total (add deductions on lines 5 through 11). Enter here and on the Depreciation line of your return (Partnerships and S corporations - Do NOT include any amounts entered on line 5.)	558834
13 For assets above placed in service during the current year, enter the portion of the basis attributable to additional section 263A costs. (see instructions)	

Part III Amortization

(a) Description of Property	(b) Date acquired	(c) Cost or other basis	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
1 Amortization for property placed in service only during tax year beginning in 1988					
2 Amortization for property placed in service prior to 1988					
3 Total. Enter here and on Other Deductions or Other Expenses line of your return.					

1988COMPANY NAME: TRINTIY BRAODCASTING OF FLORIDA, Inc.FEIN: 59-1991004STATEMENT NO. 1RELATED ORGANIZATIONS

		<u>STATUS</u>
TRINITY BROADCASTING NETWORK, INC.	95-2844062	EXEMPT
COMMUNITY EDUCATIONAL TV, INC. DBA PARADISE ACRES	33-0046339	EXEMPT
TRINITY BROADCASTING OF DENVER, INC.	84-0736095	EXEMPT
TRINITY BROADCASTING OF FLORIDA, INC.	59-1991004	EXEMPT
TRINITY BROADCASTING OF ARIZONA, INC.	86-0335082	EXEMPT
TRINITY BROADCASTING OF NEW YORK, INC.	14-1631995	EXEMPT
TRINITY BROADCASTING OF TEXAS, INC.	74-1945661	EXEMPT
TRINITY BROADCASTING OF WASHINGTON, INC.	91-0996619	EXEMPT
TRINITY BROADCASTING OF OKLAHOMA, INC.	73-1011191	EXEMPT
TRINITY BROADCASTING OF INDIANA, INC.	31-1016441	EXEMPT
AREA CHRISTIAN TELEVISION, INC.	31-0988100	EXEMPT
EDUCATIONAL TELEVISION OF HOUSTON, INC.	76-0071975	EXEMPT
NATIONAL MINORITY T.V., INC.	95-3553530	EXEMPT
HOLIDAY RV PARKS, INC. DBA TRINITY TOWERS	59-1936576	NON-EXEMPT

TRINITY BROADCASTING OF FLORIDA, INC.

LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

STATEMENT 2

59-1991004

	NAME AND ADDRESS	TITLE AND TIME	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLAN			EXPENSE ACCOUNT
1	PAUL F. CROUCH	PRESIDENT/					
2	1973 PORT CHELSEA PLACE	DIRECTOR	NONE		NONE		NONE
3	NEWPORT BEACH, CA. 92660	AS NEEDED					
4							
5							
6	JANICE W. CROUCH	VICE PRES./					
7	1973 PORT CHELSEA PLACE	DIRECTOR	NONE		NONE		NONE
8	NEWPORT BEACH, CA. 92660	AS NEEDED					
9							
10	MIKE EVERETT	ASST. SEC.					
11	3300 PEMBRUKE Rd.		NONE				
12	PEMBRUKE PARK, FL 33	AS NEEDED			NONE		NONE
13							
14							
15							
16	NORMAN G. JUGGERT	SECRETARY/					
17	24612 SHADOW FOX DRIVE	TREASURER/DIR.	NONE		NONE		NONE
18	EL TORO, CA. 92630	AS NEEDED					
19							
20							
21	RALPH DUFF	ASST. SEC.					
22	15052 HUMPHREY CIRCLE	AS NEEDED	NONE		NONE		NONE
23	IRVINE, CA. 92714						
24							
25							
26	PHILIP A. CROUCH	ASST. SEC.					
27	3712 SEACLIFF	AS NEEDED	NONE		NONE		NONE
28	SANTA ANA, CA. 92704						
29							
30							
31	Charlene Williams	ASST. SEC.					
32	11823 Quartz Circle	AS NEEDED	NONE		NONE		NONE
33	Fountain Valley, CA. 92708						
34							
35	Matthew Crouch	Asst. Sec.					
36	17 Bahia	As Needed	NONE		NONE		NONE
37	Irvine, CA. 92714						
38							

(12)

25748

m
m
B
E
X.

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c) (except black lung benefit trust or private foundation)
of the Internal Revenue Code or section 4947(a)(1) trust

OMB No. 1545-0047

1988

Note: You may be required to use a copy of this return to satisfy state reporting requirements. See instruction D.

For the calendar year 1988, or fiscal year beginning

, 1988, and ending

, 19

Use IRS label. Other-wise, please print or type.	Name of organization NATIONAL MINORITY T.V., Inc.	A Employer identification number (see instruction L) 95-3553530
	Address (number and street) 2442 MICHELLE DRIVE	B State registration number (see instruction D) 0992699
	City or town, state, and ZIP code TUSTIN, CA. 92680	C Section 4947(a)(1) trusts filing this form in lieu of Form 1041, check here <input type="checkbox"/> (see instruction C10)

D Check type of organization—Exempt under section ☒ 501(c) (3) (insert number), OR ☐ section 4947(a)(1) trust

E Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ☐

Check here if application for exemption is pending ☐

F Is this a group return (see instruction J) filed for affiliates? ☐ Yes ☒ No
If "Yes," enter the number of affiliates for which this return is filed _____

G If "Yes" to either, give four-digit group exemption number (GEN) ☐

Is this a separate return filed by a group affiliate? ☐ Yes ☐ No

H ☐ Check here if your gross receipts are normally not more than \$25,000 (see instruction B11). You do not have to file a completed return with IRS but should file a return without financial data if you were mailed a Form 990 Package (see instruction A). Some states may require a completed return.

I ☐ Check here if gross receipts are normally more than \$25,000 and line 12 is \$25,000 or less. Complete Parts I (except lines 13-15), III, IV, VI, and VII and only the indicated items in Parts II and V (see instruction I). If line 12 is more than \$25,000, complete the entire return.

501(c)(3) organizations and 4947(a)(1) trusts must also complete and attach Schedule A (Form 990). (See instructions.)

These columns are optional—
see instructions

Part I Statement of Support, Revenue, and Expenses and Changes in Fund Balances		(A) Total	(B) Unrestricted/Expendable	(C) Restricted/Nonexpendable
Support and Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Direct public support	130,050		
	b Indirect public support			
	c Government grants			
	d Total (add lines 1a through 1c) (attach schedule—see instructions).	130,050		
	2 Program service revenue (from Part IV, line f)			
	3 Membership dues and assessments			
	4 Interest on savings and temporary cash investments	7,890		
	5 Dividends and interest from securities			
	6a Gross rents			
	b Minus: rental expenses			
	c Net rental income (loss)			
7 Other investment income (Describe <input type="checkbox"/> Securities <input type="checkbox"/> Other)				
8a Gross amount from sale of assets other than inventory				
b Minus: cost or other basis and sales expenses				
c Gain (loss) (attach schedule)				
9 Special fundraising events and activities (attach schedule—see instructions):				
a Gross revenue (not including \$ of contributions reported on line 1a)				
b Minus: direct expenses				
c Net income (line 9a minus line 9b)				
10a Gross sales minus returns and allowances				
b Minus: cost of goods sold (attach schedule)				
c Gross profit (loss)				
11 Other revenue (from Part IV, line g)				
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8c, 9c, 10c, and 11)	137,940			
Expenses	13 Program services (from line 44, column (B)) (see instructions)	45,525		
	14 Management and general (from line 44, column (C)) (see instructions)	66,293		
	15 Fundraising (from line 44, column (D)) (see instructions)			
	16 Payments to affiliates (attach schedule—see instructions)			
	17 Total expenses (add lines 16 and 44, column (A))	111,818		
Fund Balances	18 Excess (deficit) for the year (subtract line 17 from line 12)	26,122		
	19 Fund balances or net worth at beginning of year (from line 74, column (A))	(480,574)		
	20 Other changes in fund balances or net worth (attach explanation)	(482,928)		
	21 Fund balances or net worth at end of year (add lines 18, 19, and 20)	28,476		

TAN- Assume ALL

Federal Communications Commission

Docket No. 93-75 Exhibit No. 272

Presented by WV

DEC 03 1993

Disposition

Received

DEC 03 1993

Rejected

Reporter

Date

DEC 03 1993

A. M. Baker